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CONFIRMATION NO. 1075

Bib Data Sheet

SERIAL NUMBER 09/590,002	FILING DATE 06/08/2000 RULE	CLASS 514	GROUP ART UNIT 1621	ATTORNEY DOCKET NO. 295.007US4
APPLICANTS Lawrence L. Kunz, Redmond, WA; ** CONTINUING DATA ***** This application is a CON of 08/389,712 02/15/1995 PAT 6,515,009 which is a CIP of 08/011,669 01/28/1993 ABN which is a CIP of PCT/US92/08220 09/25/1992 ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/21/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY WA	SHEETS DRAWING 19	TOTAL CLAIMS 101
INDEPENDENT CLAIMS 10				
ADDRESS 21186				
TITLE Therapeutic inhibitor of vascular smooth muscle cells				
FILING FEE RECEIVED 2954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Verified and Acknowledged _____ Examiner's Signature Initials		INDEPENDENT CLAIMS 10		
ADDRESS 20583 ✓				
TITLE Therapeutic inhibitor of vascular smooth muscle cells				
FILING FEE RECEIVED 2954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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SERIAL NUMBER 09/590,002	FILING DATE 06/08/2000 RULE -	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 295.007US4	
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